**FEC** 

## **STATEMENT OF**

| FORM 1                        | ORGANIZ                                      | ATION   |                  |                                 |
|-------------------------------|--|---|------------------|---------------------------------|
|                               | (See instruct                                | ions)   |                  | Office use only                 |
| NAME OF COMMITTEE (in         | full) X (Check if name is changed)           | Example: If typying, type over the lines                                | 12FE4M5          |                                 |
| ZIMMER, Inc.                  | POLITICAL ACTION COMMITTE                    | EE <sub>.</sub> (a.k.a. Z-PAC)  |                  |                                 |
|                               |  |   |                  |                                 |
| ADDRESS (number and           | street) 345 EAST MAIN ST                     | REET  |                  |                                 |
| (Check if address is changed) | PO BOX 708                                   |   | 11111            |                                 |
|                               | WARSAW                                       |   | LIN L            | 46581                           |
|                               |  | CITY▲   | STATE▲           | ZIP CODE ▲                      |
| COMMITTEE'S E-MA              | IL ADDRESS (Please provide only one          | e-mail address)   |                  |                                 |
| (Check if address is changed) | zpacs@cox.net                                |   |                  |                                 |
|                               |  |   |                  |                                 |
| COMMITTEE'S WEB               | PAGE ADDRESS (URL)                           |   |                  |                                 |
| (Check if address is changed) | ; <u> </u>                                   |   | 11111            | 1 1 1 1 1 1 1 1                 |
|                               |  |   |                  |                                 |
|                               |  |   |                  |                                 |
| 2. DATE 0.8                   |  |   |                  |                                 |
| 3. FEC IDENTIFICA             | TION NUMBER                                  | C C00399386   |                  |                                 |
| 4. IS THIS STATEM             | 1ENT NEW (N) OR                              | X AMENDED (A)   | _                |                                 |
|                               |  |   |                  |                                 |
| I certify that I have exami   | ined this Statement and to the best of my ki | nowledge and belief it is true, correc                                  | t and complete   |                                 |
| Time or Driet Name of         | Treasurer Mr. Christophe                     | r A. Cerone   |                  |                                 |
| Type or Print Name of         | reasurer                                     | . 711 0010110   |                  |                                 |
| Signature of Treasurer        | Electronically Filed by Mr. Chri             | stopher A. Cerone   | Date 08          | 30 / 2010                       |
| NOTE: Submission of fa        | lse, erroneous, or incomplete information m  |   | •                | es of 2 U.S.C. §437g.           |
|                               | ANY CHANGE IN INFORM                         | ATION SHOULD BE REPORTE   | D WITHIN 10 DAYS |                                 |
| Office<br>Use<br>Only         |  | For further information Federal Election Communication Free 800-424-953 | mission          | FEC FORM 1<br>(Revised 02/2009) |